

Student Application Form

Thank you for your interest in enrolling in Australian Institute of Language.

Please ensure that you answer ALL of the following questions to ensure correct processing of your application.

Please tick where appropriate.

Personal Details (as appears on passport)

| | | | |
|----------------------|--|--------------------|---|
| Title | <input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Miss. <input type="checkbox"/> Ms. | Gender | <input type="checkbox"/> Male <input type="checkbox"/> Female |
| Given Name(s) | | Family Name | |
| Date of Birth | <i>(dd/mm/yyyy)</i> | Nationality | |
| Passport No. | | Country of Birth | |
| Passport Expiry date | | Passport Issued by | |

Contact Details

| | | | |
|-------------------------|--------------|----------|--|
| Address in Australia | | | |
| Suburb/ City | State | Postcode | |
| Address in Home Country | | | |
| Suburb/ City | State | Postcode | |
| Home phone (Australian) | Mobile phone | | |
| E-mail Address | | | |

Emergency Contacts Details

| | | |
|--------------------|----------|---------------|
| Next of Kin | Name: | Phone Number: |
| | Address: | Relationship: |
| Australian Contact | Name: | Phone Number: |
| | Address: | Relationship: |

Visa Information

| | |
|--|--|
| Have you visited or studied in Australia previously? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Are you holding a valid Australia visa? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| If yes, what type of visa do you have? | Visa expiry date: <i>(dd/mm/yyyy)</i> |
| If no, what type of visa will you be holding when you commence your studies? | |
| <input type="checkbox"/> Student <input type="checkbox"/> Working Holiday <input type="checkbox"/> PSW <input type="checkbox"/> Other (Please specify _____) | |
| Have you applied to become a permanent resident of Australia? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| If yes, date of application (dd/mm/yyyy): _____ | |

| Medical Conditions | |
|---|--|
| Do you consider yourself to have a disability, impairment or long-term condition? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| If yes, please specify ALL conditions: | |
| <input type="checkbox"/> Vision | <input type="checkbox"/> Hearing / Deaf |
| <input type="checkbox"/> Physical | <input type="checkbox"/> Medical condition |
| <input type="checkbox"/> Learning | <input type="checkbox"/> Acquired brain impairment |
| | <input type="checkbox"/> Intellectual |
| | <input type="checkbox"/> Mental illness |
| | <input type="checkbox"/> Other: _____ |
| Do you need special assistance from the college because of the disability? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| If yes, please specify: | |

| Overseas Student Health Covers (OSHC) | | | | |
|--|--------------------------|--|--------------------------|----------------------------------|
| Do you have medical coverage for your stay in Australia? If YES, please provide details below. | | | | |
| Name of Provider | | | | Membership Number |
| Do you require AIL to organise your health cover? | | <input type="checkbox"/> Yes <input type="checkbox"/> No | | |
| If yes, please tick the cover you require below. | | | | |
| | Bupa | Medibank | AHM | |
| Single | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> 1 year |
| Couple | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> 2 years |
| Family | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |

| Previous Academic | | | |
|--|---|--|----------|
| Highest School Level completed? (E.g. Did not go to school / Year 9 / Year 11 / Year 12) | | | |
| Year Highest School Level Completed: | | | Country: |
| Have you SUCCESSFULLY COMPLETED any of the following qualifications? (You may choose more than one) | | | |
| <input type="checkbox"/> Bachelor Degree or Higher Degree | <input type="checkbox"/> Advanced Diploma or Associate Degree | <input type="checkbox"/> Diploma or Associate Diploma | |
| <input type="checkbox"/> Certificate IV or Advanced Certificate/Technician | <input type="checkbox"/> Certificate III or Trade Certificate | | |
| <input type="checkbox"/> Certificate II | <input type="checkbox"/> Certificate I | <input type="checkbox"/> Certificates other than above | |
| 1 - Qualification: | Institute: | | |
| Country: | Date of completion: | | |
| 2 - Qualification: | Institute: | | |
| Country: | Date of completion: | | |
| 3 - Qualification: | Institute: | | |
| Country: | Date of completion: | | |

| English Proficiency | | | |
|---|--|--|---------------------------|
| Is English your first language? | | <input type="checkbox"/> Yes <input type="checkbox"/> No: What is your first language? _____ | |
| Have you taken an English language test? | | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| If yes, please attach a certified copy of your results, or submit a certified copy. | | | Date of test (dd/mm/yyyy) |
| Test Type | | Result | |

| Employment | | |
|---|---|---|
| Please tick ONE of the following that best describes your current employment status. | | |
| <input type="checkbox"/> Full-time employee | <input type="checkbox"/> Self employed – not employing others | <input type="checkbox"/> Employed- unpaid worker in a family business |
| <input type="checkbox"/> Part-time employee | <input type="checkbox"/> Employer | <input type="checkbox"/> Unemployed – seeking full time work |
| <input type="checkbox"/> Unemployed – seeking part time work | | <input type="checkbox"/> Not employed – not seeking employment |
| If you have ticked any of the options for being unemployed, please continue to Unique Student Identifier . | | |
| Please tick ONE of the following classifications that BEST describes your current or recent occupation: | | |
| <input type="checkbox"/> Manager | <input type="checkbox"/> Professionals | <input type="checkbox"/> Technicians and Trade Workers |
| <input type="checkbox"/> Community and Personal Service Workers | <input type="checkbox"/> Clerical and Administrative Workers | <input type="checkbox"/> Sales Workers |
| <input type="checkbox"/> Machinery Operators and Drivers | <input type="checkbox"/> Labourers | <input type="checkbox"/> Other |
| Please tick ONE of the following that BEST describes the industry of your current or previous Employment: | | |
| <input type="checkbox"/> Agriculture, Forestry and Fishing | <input type="checkbox"/> Mining | <input type="checkbox"/> Manufacturing |
| <input type="checkbox"/> Electricity, Gas, Water and Waste Services | <input type="checkbox"/> Construction | <input type="checkbox"/> Wholesale Trade |
| <input type="checkbox"/> Retail Trade | <input type="checkbox"/> Accommodation and Food services | <input type="checkbox"/> Transport, Postal and Warehousing |
| <input type="checkbox"/> Information Media and Telecommunications | <input type="checkbox"/> Financial and Insurance Services | <input type="checkbox"/> Rental, Hiring and Real Estate Services |
| <input type="checkbox"/> Professional, Scientific and Technical Services | <input type="checkbox"/> Administrative and Support Services | <input type="checkbox"/> Public Administration and Safety |
| <input type="checkbox"/> Education and Training | <input type="checkbox"/> Health Care and Social Assistance | <input type="checkbox"/> Arts and recreation services |
| <input type="checkbox"/> Other services | | |

| Unique Student Identifier | |
|---|--|
| Do you have a Unique Student Identifier (USI)? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| If yes, please specify: <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | |
| If you choose NO on the question above, please read through the following and tick the boxes if you agree: | |
| <input type="checkbox"/> | I will create a USI for myself by going to www.usi.gov.au . |
| <input type="checkbox"/> | I understand that if I do not provide Australian Institute of Language with my USI, they cannot issue any certificate or statement of attainment. |
| <input type="checkbox"/> | I give permission for Australian Institute of Language to check for a USI on my behalf if I do not provide them with one when I begin attending classes. |

Course Information: Please tick the course/s you are applying for

| Course Code | Course Name | Course Duration | Proposed Start Date |
|-----------------------------------|---|-----------------|---------------------|
| BSB50420 <input type="checkbox"/> | Diploma of Leadership & Management | 52 Weeks | |
| PSP50916 <input type="checkbox"/> | Diploma of Interpreting (LOTE - English) – (Mandarin – English) | 52 Weeks | |
| PSP60816 <input type="checkbox"/> | Advanced Diploma of Translating | 52 Weeks | |

Study Reason

Of the following categories, select **ONE** which BEST describes the main reason you are undertaking the course(s)

- | | | |
|--|--|---|
| <input type="checkbox"/> To get a job | <input type="checkbox"/> To get a better job or promotion | <input type="checkbox"/> For personal interest or self-development |
| <input type="checkbox"/> To develop my existing business | <input type="checkbox"/> It was a requirement of my job | <input type="checkbox"/> To get skills for community/voluntary work |
| <input type="checkbox"/> To start my own business | <input type="checkbox"/> I wanted extra skills for my job | <input type="checkbox"/> Other reasons |
| <input type="checkbox"/> To try for a different career | <input type="checkbox"/> To get into another course of study | |

Generic Admission Requirements

Applicants must not be less than 18 years of age at the proposed start date.

All students entering these qualifications must have an English Language proficiency level of one of the below:

- IELTS score of 5.5, or
- Completion of a recognised English language course (minimum requirement: Certificate IV in EAL), or
- Completion of a recognised Diploma or equivalent, or above in any discipline delivered in English

Please contact administration of AIL to obtain detailed entry requirements for each course.

If students wish to discuss any of their matter relevant to their entry and study requirements further, they are free to contact Administration officers.

Course Credit (Applicable for VET courses only)

- Yes, (If yes, please provide copies of your academic transcripts)
- No

Agent Details: (if applicable)

| | |
|-------------|-------------|
| Agent Name: | Contact No: |
| Address: | |

TERMS AND CONDITIONS

Privacy Statement

Australian Institute of Language, also referred to as AIL, respects the right to privacy and fully complies with our obligations under the Privacy Act 2000 for all of our applicants.

Student Visa Conditions

Under Australian Government regulations all overseas students must be enrolled for, and engaged in, full-time study, unless on a spousal visa.

Overseas Student Health Cover (OSHC) is compulsory for all overseas students while studying in Australia. OSHC does not cover optometry, dental services or pre-existing conditions (i.e. prior to entry into Australia).

Personal Information

The information provided by you may be available to Commonwealth and State Agencies and the Fund Manager of the ESOS Assurance Fund, pursuant to obligations under the ESOS Act 2000 and the National Code. AIL is required to advise the Department of Home Affairs (DHA) about certain changes to your enrolment, and any breach by you of a visa condition relating to attendance or unsatisfactory academic performance. In addition, information collected on this form and during your enrolment in order to meet our obligation under the ESOS Act and the National Code 2018 are to ensure student compliance with the conditions of their visas and their obligations under Australian immigration laws generally. The authority to collect this information is contained in the Education Services of Practice for Registration Authorities and Providers of Education and Training to Overseas Students 2018. Information collected about you on this form and during your enrolment can be provided, in certain circumstances, to the Assurance Fund Manager. In other instances, information collected on this form or during your enrolment can be disclosed without your consent where authorised or required by law.

Refund Policy

To claim a refund, the student must complete a refund application form available from student administration.

The refund amount in the table below is based on fees collected from a learner

| Situation | Refund fees |
|---|---------------------------------------|
| AIL does not deliver the course for which the learner has paid for the following reasons: <ul style="list-style-type: none"> - <i>The course does not begin on the agreed commencement date</i> - <i>The offer is withdrawn by AIL and incomplete information is provided by the learner</i> - <i>The course ceases to be provided, before any training and/or assessment</i> - <i>Visa refused (before commencement)</i> | Full refund on tuition fees |
| Withdrawal notified in writing and received by AIL 28 days or more prior to course commencement | 100% refund of tuition fees |
| Withdrawal notified in writing and received by AIL less than 28 days prior to course commencement | 50% refund of tuition fees |
| Withdrawal notified in writing and received by AIL after the course commencement | No refund |
| The course is not provided in full to the learner because a sanction has been imposed on AIL | Charged according to the study period |
| Visa refused (after commencement) | Charged according to the study period |

This must be read in conjunction with *Fees, Charges and Refund Policy* in *Student Handbook*.

Privacy Notice

Under the *Data Provision Requirements 2012*, Australian Institute of Language is required to collect personal information about you and to disclose that personal information to the National Centre for Vocational Education Research Ltd (NCVER).

Your personal information (including the personal information contained on this enrolment form), may be used or disclosed by Australian Institute of Language for statistical, administrative, regulatory and research purposes. Australian Institute of Language may disclose your personal information for these purposes to:

- Commonwealth and State or Territory government departments and authorised agencies; and
- NCVER.

Personal information that has been disclosed to NCVER may be used or disclosed by NCVER for the following purposes:

- populating authenticated VET transcripts;
- facilitating statistics and research relating to education, including surveys and data linkage;
- pre-populating RTO student enrolment forms;
- understanding how the VET market operates, for policy, workforce planning and consumer information; and
- administering VET, including program administration, regulation, monitoring and evaluation.

You may receive a student survey which may be administered by a government department or NCVER employee, agent or third party contractor or other authorised agencies. Please note you may opt out of the survey at the time of being contacted.

NCVER will collect, hold, use and disclose your personal information in accordance with the *Privacy Act 1988* (Cth), the National VET Data Policy and all NCVER policies and protocols (including those published on NCVER's website at www.ncver.edu.au).

For more information about NCVER's Privacy Policy go to <https://www.ncver.edu.au/privacy>

Application checklist

- | | |
|--|---|
| <input type="checkbox"/> Completed all sections of the application form | <input type="checkbox"/> Attached evidence of English language proficiency |
| <input type="checkbox"/> Read and understood the terms and conditions, privacy, & refund policies. | <input type="checkbox"/> Included certified copy of your passport |
| <input type="checkbox"/> Attached certified copies of your academic qualifications (and English translation) | <input type="checkbox"/> Included certified copy of your visa (if applicable) |
| | <input type="checkbox"/> Included relevant employment details (if applicable) |
| | <input type="checkbox"/> AUD\$250 non-refundable enrolment fee |

Student Declaration and Consent

This application is not valid unless signed and dated.

I further declare that I agree to abide by the terms and conditions of enrolment, including the refund policy, of which I have read and understood. I understand that the Privacy Notice no longer requires Australian Institute of language to collect and keep a record of my consent to collection, use and disclosure of my personal information on this form.

I also declare that I have been issued with a copy of the refund policy and have a full understanding of the conditions that apply in regards to claiming a refund. I certify that the information provided on this form is true and correct and I agree to abide by the terms and conditions or enrolment.

| | | |
|-------------------|--|------------------------------------|
| Signature: | | Date: <i>dd / mm / yyyy</i> |
|-------------------|--|------------------------------------|